

Pro Se 14 (Rev. 09/16) Complaint for Violation of Civil Rights (Prisoner)

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA

(Write your full name. No more than one plaintiff may be named in a complaint.) -1/-

(Write the full name of each defendant who is being sued. If the names of all of the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here. Your complaint may be brought in this court only if one or more of the named defendants is located within this district.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee of \$400.00 or an Application to Proceed In Forma Pauperis.

Mail the original complaint and the filing fee of \$400.00 or an Application to Proceed In Forma Pauperis to the Clerk of the United States District Court for the Northern District of Alabama, Room 140, Hugo L. Black U.S. Courthouse, 1729 5th Avenue North, Birmingham, Alabama 35203-2195.

I. The Parties to this Complaint

A	The	DI.	_ •	4:00
Α.	1 110	F 12	4111	ши

Provide	the	inforn	nation	below	for	the	plaintiff	named	in	the	comp	laint.

Name			
All other names by which	1		
you have been known:	Ameer L. S	mith	
ID Number	AIS# 20781	O Bed#	W-36
Current Institution	DONaldSON C	ORRECTIONAL	Facility
Address	100 Warrior 1	Lans	/
	Bessemer	<u> Al. </u>	<u>35023</u>
	City	State	Zip Code

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (*if known*) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed

Defendant No. 1

Name	Andre Phillips
Job or Title (if known)	COI
Shield Number	
Employer	Alabama Department of CORRECTION
Address	DONaldSON CORRECTIONAL Facility
	Bessemer A1. 35023 City State Zip Code
	☑ Individual Capacity ☐ Official Capacity
Defendant No. 2	
Name	
Job or Title (if known)	
Shield Number	
Employer	
Address	
	City State Zip Code
	☐ Individual Capacity ☐ Official Capacity

II.

Def	fendant No. 3					
J S H	Name ob or Title <i>(if known)</i> Shield Number Employer Address					
			City		State	Zip Code
			Individual Capacity		Official Capacity	
Def	endant No. 4					
J S	Name ob or Title <i>(if known)</i> Shield Number Employer Address					
			City		State	Zip Code
			Individual Capacity		Official Capacity	
Bas	is for Jurisdiction					
priv Nar	der 42 U.S.C. § 1983, you marileges, or immunities secure ned Agents of Federal Bureau violation of certain constitute. Are you bringing suit agai Federal officials (a Bi	ed by u of N tiona nst (c	the Constitution and [fe farcotics, 403 U.S. 388 (19 l rights. heck all that apply);	deral la	w]." Under Bivens v	. Six Unknown
	State or local officials	(a § :	1983 claim)			
B.	Section 1983 allows claims secured by the Constitutio 1983, what federal constitutional officials? EXCESSIVE FOR	n and	l [federal laws]." 42 U.S.C ll or statutory right(s) do	C. § 198 you cl	3. If you are suing u aim is/are being viol	nder section lated by state or
	EXCESSIVE FO	<u>. L</u>	and unusual	Pur	VishmeNT,	(see) Hudson
	vs. McMillian.					

	C.	Plaintiffs suing under <i>Bivens</i> may only recover for violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?					
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under Bivens, explain how each defendant acted under color of federal law. Attach additional pages if needed. USE of Force 15 excessive And Violates The ElGhth Amendment					
		When it is NOT APPlied IN AN EFFORT TO MAINTAIN OR RESTORE					
III.	Pri	discipline but is used to Maliciously and Sadistically Cause he soner Status					
	Ind	icate whether you are a prisoner or other confined person as follows (check all that apply):					
		Pretrial Detainee					
		Civilly committed detainee					
		Immigration detainee					
	V	Convicted and sentenced state prisoner					
		Convicted and sentenced federal prisoner					
		Other(explain)					
IV.	Sta	tement of Claim					
	in th inclu clair	e as briefly as possible the facts of your case. Describe how each defendant was personally involved he alleged wrongful action, along with the dates and locations of all relevant events. You may wish to ude further details such as the names of other persons involved in the events giving rise to your ms. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write ort and plain statement of each claim in a separate paragraph. Attach additional pages if needed.					
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.					
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose.					
		The WrongDoing Took Place at Donaldson Corr. Facility					

V.

VI.

C. What date and approximate time did the events giving rise to your claim(s) occur? Nay 2nd 2020
D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what was anyone else involved? Who else saw what happened? See The arrached Page 5+1 Through 5+5
Injuries
If you sustained injuries related to the events alleged above, describe your injuries in detail.
MY arm BING BETTING SO MANY TIMES WITH a OFFICER
Baton, U.A.B. hospital did a EMERGENCY Surgery FOR Many Broken Bones, That was Replaced with Metal Plate
Relief
State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases of statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.
PlaiNTIFF Seek's \$ 250,000 IN PUNITIVE
Damages FOR The UNNECESSARY AND WANTON
Damages FOR The UNNECESSARY AND WANTON INFLICTION OF Pain- AND SEEKS \$ 25,000 IN
Compensatory Damages For the DEFENDAN;
Compensatory Damages For the DeFendan; ACTING with Deliberate Indifference To
The Plaintiff's Health And Safety Causing
IlleGal Future Damages.
And Seek's \$ 25,000 IN EMOTIONAL Damag
AND INJURIES SUFFERED While IN CUSTOdy
Under Illegal Physical InJury.

Page 5+1

ON May 2. 2020. at 3:50 am, I The Plaintiff Was at Donaldson Correctional FACILITY, IN ITS SEGREGATION UNIT ON D-Side Those Segregation CELL'S has Tray DOOR'S AND TWO MEN TO a CEII. The Plaintiff'S CELL MOTE Was WORKING INSIDE The Segregation UNIT When The Plaintiff Came To The Tray DOOR AND aked THE CEILMATE Who Was WORKING outside The CEII, TO GET THE OFFICER'S, THAT I Was Feeling Pain By THE heart. THE INMATE had INFORMED THE OFFICER Who was working Inside D-side Cubicle Whom Name of The OFFICER IS UNKNOWN, That I INMATE Ameer L. Smith NEEDED Medical attention, Told by CELLMATE NORMAN EVINS ... NO ONE CAME TO The CELL FOR THE NEEDED MEDICAL ATTENTION TO BE provided. INMATE EVINS had WENT BACK To The Cube To INFORM The UNKNOWN OFFICER FOR The second TIME OF The EMERGENCY, NO ONE Came To The Cell FOR The NEEDED Medical attention To be provided. AFTER ABOUT AN HOUR The DEFENDANT, OFFICER ANDTE Phillips

fage 5+ 2

had came INTO The DORM OF about 4:45 am, To Make his last Rounds And To Close All Tray Door's, The Plaintiff's ARM had been hanging out the Tray Door FOR REASON'S TO GET The OFFICER'S ATTENTION FOR The Needed Medical ATTENTION To be Provided, When The DEFENDANT GOT TO THE PlaiNTIFF'S CELL D-47 I INFORMED The DEFENDANT That I Needed to be TakEN To MedicaL That I Felt as IF I was having A Stroke, OR heart ATTack. The DEFENDANT STATED That There Was Nothing he could Do FOR ME And asked ME To ReMove My Right ARM From The Tray DooR, I the PlaiNTIFF STATES That IT was serious And That I'VE GOTTEN OIDER AND have BEEN having Alot of Pain IN area's around the heart, The Defendant had Got out his pepper spray And Maced ME IN The Face Twice, While I was IN a KNEELING POSITION AT MY Tray DOOR Seeking Medical Attention FOR A Serious Medical Need, AFTER Which, The

page 5 + 3

DeFendant had UNREasonably DISREGARDED AN EXCESSIVE RISK TO The Plaintiff's Safety When he Pulled OUT his OFFICER bOTON AND STARTED beating my Right ARM While The arm was only setting on the Tray DOOR Making NO MOVEMENTS While asking for Medical ATTENTION, The arm Started Swelling While The Brutality was Being Done, That Brutality Violated Prison A.D.O.C. policy, of hornds OFF INMATES, AND Doe's CONSTITUTES Cruel and UNUSUAL PUNIShMENT OF The Elghth AMENDMENT of Excessive Force, Because: NOT ONLY DID THE DEFENDANT DIS-Regarded The A.D.O.C. hands OFF INMATES policy, This Brutality VIOLATES THE EighTh AMENDMENT BECAUSE IT Was NOT applied IN a Good faith EFFORT TO Maintain OR Restore discipline, but INSTEAD Was used to Maliciously AND Sadistically to Cause harm. There Fore, The DEFENDANT Should be

page 5+4

held Responsible FOR UNNECESSARY
AND WANTON INFLICTION OF PAIN, Where
The Condition of the ARM, OR The
Beating To the arm has Resulted
IN FURTHER SIGNIFICANT INJURY, AS
NOT being Useable as it once was
Before The Brutality.

FRATE: AFTER The BRUTING TO

facts: AFTER The BEATING TO The arm, The DeFendaNT Walked out of the Segregation UNIT AFTER About 5 MINUTES, 2 OTHER OFFICER'S Came To The CEIL To GET The Plaintiff And Escorted The Plaintiff To The Health care UNIT. The NURSe's Seen how Bad The arm looked And NotiFied The doctor, Whom Told The Medical UNIT To Call The ambulance, while on The ambulance Those medical providers NoTICED AN EMERGENCY OF The PlaiNTIFF was ON The Verge of having a heart attack. hours of Surgery at U.A.B. hospital The Surgery Resulted IN Sections of The arm had To be CUT, so That Parts of Bone's Could be Removed

Page 5 + 5

And Replaced With Metal Plates
With Screws And boits holding it in
place. After which I was Informed
That I'll NEVER be able to use my
ARM as I ONCE DID, And That I
MAY have Complications with that Right
ARM FOR the Rest of my life.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	DONaldson CORRECTIONAL FACILITY.
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	□ No
	☐ Do Not Know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or. all of your claims?
	Yes
	□ No
	☐ Do Not Know
	If yes, which claim(s)? EXCESSIVE FORCE IS NOT Allowed under
	The A.D.O.C. Policy, hands off INMATES.

D.		d you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose conning the facts relating to this complaint?
	V	Yes
		No
		no, did you file a grievance about the events described in this complaint at any other jail, prison, or er correctional facility?
		Yes
		No
E.	Ify	ou did file a grievance
	I.	Where did you file the grievance?
		DONaldson CORRECTIONAL FACILITY.
	2.	What did you claim in your grievance?
	3.	EXCESSIVE FORCE IN VIOLATION OF The hands OFF INMATE POLICY. What was the result, if any?
	4.	AFTER The Grievance Was File on June 10, 2020 I'VE heard Nothing BACK. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
		AFTER The Grievance was File on June 18. 2020. I've heard NoThing BACK.

	If you did not file a grievance:								
	I.	If there are any reasons why you did not file a grievance, state them here:							
	2.	If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:							
3.		ase set forth any additional information that is relevant to the exhaustion of your administrative nedies.							
		ote: You may attach as exhibits to this complaint any documents related to the exhaustion of your ministrative remedies.)							
Pre	viou	s Lawsuits							
The		ee strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without							
payi any it is	faci friv	the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in ity, brought an action or appeal in a court of the United States that was dismissed on the grounds that blous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under the danger of serious physical injury." 28 U.S.C. § 1915(g).							
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VIII.

A.		we you filed other lawsuits in state or federal court dealing with the same facts involved in this ion?
		Yes
	V	No
В.	the	your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If the re is more than one lawsuit, describe the additional lawsuits on another page, using the same mat.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		□ Yes
		□ No
	Ifn	o, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)

IX. Certification and Closing

Under Federal Rule of Civil-Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Printed Name of Plaintiff

Prison Identification #

Prison Address

| DO WARRIOR Lange | 35023

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

Signature of Plaintiff